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\*\* CONTINUING DATA \*\*\*\*\*  
*Name* *86*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*Name* *86*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>B. Gilliam</i> Examiner's Signature Initials	STATE OR COUNTRY NY	SHEETS DRAWING	TOTAL CLAIMS 35	INDEPENDENT CLAIMS 2
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ADDRESS  
 31344  
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TITLE  
 On-press developable lithographic printing plate

FILING FEE  RECEIVED 1020	FEES: Authority has been given in Paper No: _____ to charge/credit DEPOSIT ACCOUNT No: _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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